| 1 | If the answer is "no," state the date of last employment and the amount of the gross and net | | | | | | |
|----|---|-----------------------|---------------------|----------------|--------------------------------|---|--|
| 2 | salary and wages per month which you received. (If you are imprisoned, specify the last | | | | | | |
| 3 | place of employment prior to imprisonment.) | | | | | | |
| 4 | GHILL STAFF TEMPORARY LABOR-SALT LAKE CITY, UT 6th SOUTH @ 2nd WEST. (WORKED IN PARK CITY, UTAH, | | | | | | |
| 5 | 6# SOUTH @ 200 WEST. (WORKED IN PARK CITY, UTAH, | | | | | | |
| 6 | \$14.00 CONSTRUCTION IN JUNE 07. | | | | | | |
| 7 | 2. Have you received, within the past twelve (12) months, any money from any of the | | | | | | |
| 8 | following so | following sources: | | | | | |
| 9 | a. | Business, Profession | or | Yes | _ No <u></u> | | |
| 10 | | self employment | | | | | |
| 11 | b. | Income from stocks, | bonds, | Yes | _ No <u></u> | | |
| 12 | Ē | or royalties? | · | | / . | | |
| 13 | c. | Rent payments? | | Yes | _ No <u>/</u> _ No <u>/</u> | | |
| 14 | d. | Pensions, annuities, | or | Yes | _ No <u> </u> | | |
| 15 | | life insurance payme | nts? | | 7 | | |
| 16 | e. | Federal or State welf | are payments, | Yes | _ No | | |
| 17 | | Social Security or ot | ner govern- | 1 | | | |
| 18 | | ment source? | | | | | |
| 19 | If the answer is "yes" to any of the above, describe each source of money and state the amount | | | | | | |
| 20 | received fro | m each. | | | | | |
| 21 | | | | | | - | |
| 22 | | | | | , · | - | |
| 23 | 3. Are | you married? | | Yes | _ No | | |
| 24 | Spouse's Fu | ill Name: | | · | | _ | |
| 25 | Spouse's Place of Employment: | | | | | | |
| 26 | Spouse's Monthly Salary, Wages or Income: | | | | | | |
| 27 | Gross \$ | <u> </u> | Net \$ | 0 | | - | |
| 28 | 4. a. | List amount you con | ntribute to your sp | ouse's support | :\$ <i>.\.\.A.</i> | | |

| i | .1 | | | | |
|----|--|--|--|--|--|
| 1 | b. List the persons other than your spouse who are dependent upon you for | | | | |
| 2 | support and indicate how much you contribute toward their support. (NOTE: | | | | |
| 3 | For minor children, list only their initials and ages. DO NOT INCLUDE | | | | |
| 4 | THEIR NAMES.). | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | 5. Do you own or are you buying a home? Yes No | | | | |
| 8 | Estimated Market Value: \$ Amount of Mortgage: \$ | | | | |
| 9 | 6. Do you own an automobile? BURROW SISTERS Yes No | | | | |
| 10 | Make Year Model | | | | |
| 11 | Is it financed? Yes No If so, Total due: \$ | | | | |
| 12 | Monthly Payment: \$ | | | | |
| 13 | 7. Do you have a bank account? Yes No (Do not include account numbers.) | | | | |
| 14 | Name(s) and address(es) of bank: | | | | |
| 15 | | | | | |
| 16 | Present balance(s): \$ | | | | |
| 17 | Do you own any cash? Yes No Amount: \$ | | | | |
| 18 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated | | | | |
| 19 | market value.) Yes No | | | | |
| 20 | | | | | |
| 21 | 8. What are your monthly expenses? | | | | |
| 22 | Rent: \$ 300.00 Mo. Utilities: #150.00 Mo. | | | | |
| 23 | Food: \$ 100 ° MO. Clothing: VARIES | | | | |
| 24 | Charge Accounts: Lowe | | | | |
| 25 | Name of Account Monthly Payment Total Owed on This Acct. | | | | |
| 26 | ss | | | | |
| 27 | \$ \$ | | | | |
| 28 | \$9. Do | | | | |

| 1 | you have any other debts? (List current obligations, indicating amounts and to whom they are | | | | | | |
|-----------|--|--|--|--|--|--|--|
| 2 | payable. Do not include account numbers.) | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | 10. Does the complaint which you are seeking to file raise claims that have been presented | | | | | | |
| 6 | in other lawsuits? Yes No V LOT AT ALL, THERE ARE NO OTHER | | | | | | |
| 7 | Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in | | | | | | |
| 8 | which they were filed. LONE | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| 11 | I consent to prison officials withdrawing from my trust account and paying to the court | | | | | | |
| 12 | the initial partial filing fee and all installment payments required by the court. | | | | | | |
| 13 | I declare under the penalty of perjury that the foregoing is true and correct and | | | | | | |
| 14 | understand that a false statement herein may result in the dismissal of my claims. | | | | | | |
| 15 16. | 8-10-07 Walter Redmond 8-10-07 | | | | | | |
| 17 | DATE SIGNATURE OF APPLICANT | | | | | | |
| 18 | | | | | | | |
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|----|--|--|--|--|--|--|
| 2 | Case Number: | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | CERTIFICATE OF FUNDS | | | | | |
| 9 | IN | | | | | |
| 10 | PRISONER'S ACCOUNT | | | | | |
| 11 | | | | | | |
| 12 | I certify that attached hereto is a true and correct copy of the prisoner's trust account | | | | | |
| 13 | statement showing transactions of WAITER REDMOND for the last six months | | | | | |
| 14 | at 850 BRYANT ST. @ C. J.#1 S.F. CA. 94103 | | | | | |
| 15 | [prisoner name] | | | | | |
| 16 | SAN FRANCISCO COUNTY JAZL#1, S.F.CA. where (s)he is confined. | | | | | |
| 17 | | | | | | |
| 18 | [name of institution] I'VE CULY BEEN INCARCERATED 25 DAYS FROM 7-15-07, I'M INDICARCERATED 25 DAYS FROM I further certify that the average deposits each month to this prisoner's account for the VARI | | | | | |
| 19 | most recent 6-month period were \$ and the average balance in the prisoner's | | | | | |
| 20 | account each month for the most recent 6-month period was \$ | | | | | |
| 21 | account each Month for the most recent a meaning period was a | | | | | |
| 22 | Dated: 8-10-07 | | | | | |
| 23 | Dated: 8-10-07 [Authorized officer of the institution] | | | | | |
| 24 | (415)553-1847 | | | | | |
| 25 | | | | | | |
| 25 | l c a a a a a a a a a a a a a a a a a a | | | | | |
| 20 | PLEASE CALL TO HAVE | | | | | |
| 27 | PLEASE CALL TO HAVE INFO FAXED FOR CON- | | | | | |
| 28 | FIRMATION. I'M INIXI- CTENT, NO FAMILY IN THIS | | | | | |
| | CHENT, NO FAMILY IN THIS STATE, THAT WILL HELP. | | | | | |

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF CALIFORNIA

INSTRUCTIONS FOR PRISONER'S IN FORMA PAUPERIS APPLICATION

You must submit to the court a completed Prisoner's In Forma Pauperis Application if you are unable to pay the entire filing fee at the time you file your complaint or petition. Your application must include copies of the prisoner trust account statement showing transactions for the last six months and a certificate of funds in prisoner's account, signed by an authorized officer of the institution. I HAVE BEEN INCARCERATED FOR A MONITH ONLY SCINCE 7-15-07, WITH ABSOLUTECY NO MONEY IN ACCOUNT.

A. Non-habeas Civil Actions I'M INDIGENT, I GET 2 ENVELOPES A WEEK.

Effective February 2, 2005, the filing fee for any civil action other than a habeas is \$250.00. Even if you are granted leave to proceed in forma pauperis, you must still pay the full amount of the court's filing fee, but the fee will be paid in several installments. 28 U.S.C. § 1915.

You must pay an initial partial filing fee of 20 percent of the greater of (a) the average monthly deposits to your account for the 6-month period immediately before the complaint was filed or (b) the average monthly balance in your account for the 6-month period immediately before the complaint was filed. The court will use the information provided on the certificate of funds and the trust account statement to determine the filing fee immediately due and will send instructions to you and the prison trust account office for payment if in forma pauperis status is granted.

After the initial partial filing fee is paid, your prison's trust account office will forward to the court each month 20 percent of the most recent month's income to your prison trust account, to the extent the account balance exceeds ten dollars (\$10.00). Monthly payments will be required until the full filing fee is paid. If you have no funds over ten dollars (\$10.00) in your account, you will not be required to pay part of the filing fee that month.

If your application to proceed in forma pauperis is granted, you will be liable for the full \$250.00 filing fee even if your civil action is dismissed. That means the court will continue to collect payments until the entire filing fee is paid. However, if you do not submit this completed application the action will be dismissed without prejudice and the filing fee will not be collected.

Habeas Actions

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The filing fee for a habeas action is \$5.00. If you are granted leave to proceed in forma pauperis you will not be required to pay any portion of this fee. If you are not granted leave to proceed in forma pauperis you must pay the fee in one payment and not in installments. If you use a habeas form to file a non-habeas civil action, you will be required to pay the \$250.00 filing fee applicable to all non-habeas civil actions.

have been in jail 25 days, with absolutely no revenues/money at all on my account/hooks, save 27¢, and I will have none on my account, il have no family here for help, I'm indigent.
My civil rights were violated, I will be pursuing an attorney at some point, I have soince tiled a "claim" with the CONTRILLER'S OFFICE, RM 396 @ CITY HALL IS SAN FRANCISCO, AND I WILL BE FILING ALL NECESARY PAPERWORK. There were many witnesses that morning, and my associates have consulted with them recently.

V. After Complaint Is Filed

You will be notified as soon as the court issues any order in your case. It is your responsibility to keep the court informed of any changes of address to ensure you receive court orders. Failure to so do may result in dismissal of your action. I HAVE A BON-A-FIDE COMPLAINT, AND WILL DURSUE AM ATTORNEY THRU THE BAR ASSN.

Repeat Filers

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If you are seeking leave to proceed in forma pauperis and, while incarcerated or detained, you have filed §§ 1983 actions on three or more prior occasions which were dismissed as frivolous, malicious, or for failure to state a claim upon which relief may be granted, you may not file a new §§ 1983 action unless you are under imminent danger of serious physical injury. 28 U.S.C. §§ 1915(g).

Inquiries and Copying Requests

Because of the large volume of cases filed by inmates in this court and very limited court resources, the court can no longer answer questions concerning the status of your case or provide copies of documents, except at a charge of fifty cents (\$0.50) per page. You must therefore keep copies of all documents submitted to the court for your own records.

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PrisonerCiv2-05.wpd (Rev. 2/05)